DECLARATION Utility Application

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled <u>WIRELESS POINT-OF-SALE TRANSACTION SYSTEM AND METHOD</u> the specification of which

(Check One)	\boxtimes	is attached hereto OR									
		was filed on International applicable).						Serial No. amended		or I	

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Date of Filing	Priority Claime	
Send Correspondence to:	IRELL & MANELLA LLP	Direct Telepho		

Send Correspondence to: Christopher A. Vanderlaan	IRELL & MANELLA LLP 1800 Avenue of the Stars, Suite 900 Los Angeles, CA 90067-4276	Direct Telephone calls to: Christopher A. Vanderlaan (310) 277-1010
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I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

201	FULL NAME OF INVENTOR	FIRST Name Jeffrey	MIDDLE Initial	LAST Name YING	
	RESIDENCE & CITIZENSHIP	City Glendora	State or Foreign Country California	Country of Citizenship U.S.A.	
	POST OFFICE ADDRESS	843 Entrada Way	City Glendora	State or Country California	Zip Code 91740
INVENTOR'S SIGNATURE DATE 1/29/04					

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POWER OF ATTORNEY By Assignee

<u>I/O Controls Corporation</u>, assignee(s) of the application for United States Letters Patent for an improvement in

WIRELESS POINT-OF-SALE TRANSACTION SYSTEM AND METHOD by Jeffrey YING.

the specification of which:						
☑ is filed herewith, OR☑ was filed on, having U.S. Patent Application Serial No.						
does hereby appoint as my attorneys and/or agents, with full power of substitution and revocation, to prosecute this application and transact all business in the United States Patent and Trademark Office, and in countries other than the United States, and to do all things necessary or appropriate therefor before any competent International Authorities in connection with any international patent application(s) corresponding to the above-identified application, all of the registered practitioners identified by Customer Number 29000:						
29000 PATENT & TRADEMARK	1800 Avenue of the S	Stars				
Please send all correspondence to the attention of Christopher A. Vanderlaan , at the above Customer Number, and direct all telephone calls to (310) 277-1010 .						
I, the undersigned, declare that I have reviewed copies of the documentary evidence establishing chain of title to the patent application identified above from the inventor(s) to the assignee(s), which:						
 is filed for recordation herewith; or was recorded at Reel, Frame; or has been sent for recordation under separate cover, copy attached herewith. 						
To the best of the undersigned's knowledge and belief, title is in the assignee(s) identified above. Furthermore, the undersigned is empowered to sign this document on behalf of the assignee(s).						
Full Name of Assignee:	I/O Controls Corporation					
Post Office Address:	1357 W. Foothill Blvd., Azusa, California 91702					
Signature of Declarant or Assign	inee:	Date: da of				
Full-Name of Declarant		·				
If Other Than Assignee:	Jeffrey Ying					
Title of Declarant:	President					
Address of Declarant:	1357 W. Foothill Blvd., Azusa, California 91702					

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